Form NLRB - 501 (2-08)

INSTRUCTIONS:

Address:

Same as 4a

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

 DO NOT WRITE IN THIS SPACE

 Case
 Date Filed

 28-CA-094176
 12-03-2012

File an original of this charge with NLRB Regional Director in which the alleged unfair labor practice occurred or is occurring. 1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT a. Name of Employer b. Tel. No. 480-655-7234 SW General, Inc., d/b/a Southwest Ambulance c. Cell No. d. Address (street, city, state ZIP code) e. Employer Representative f. Fax No. 480-655-7343 708 W. Baseline Road Roy Ryals, Chief Operating g. e-Mail Mesa, AZ 85210 Engineer roy.ryals@metro.com h. Dispute Location (City and State) Mesa.AZ j. Principal Product or Service k. Number of workers at dispute location i. Type of Establishment (factory, nursing home, hotel) 1200 Ambulance Service Patient Transport I. The above-named employer has engaged in and is engaging unfair labor practices within the meaning of section 8(a), subsections (1) of the (5) National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) During the past six-month, the above-named Employer, has interfered with restrained and coerced its employees in the exercise of the rights guaranteed in Section 7 of the Act, by failing and refusing to bargain collectively with the International Association of Fire Fighters Local I-60, AFL-CIO, (the Union), the representative that has been the designated representative of the employees covered under the collective bargaining agreement that expired on September 8, 2012, regarding the employer no longer paying its employees for Longevity pay, as set forth in Article 44 Longevity. By the above and other acts, the above-named employer has interfered with restrained and coerced its employees in the exercise of the rights guaranteed in Section 7 of the Act. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) International Association of Fire Fighters Local I-60, AFL-CIO 4a. Address (street and number, city, state, and ZIP code) 4b. Tel. No. 602-388-6801 P.O Box 4110 4c. Cell No. Mesa, AZ 85211-4110 4d. Fax No. 480-655-7281 4e. e-Mail alizardi@local60.org 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) International Association of Fire Fighters Local I-60, AFL-CIO 6. DECLARATION Tel. No. I declare that I have read the above charge and that the statements are true to the best of Same as 4b my knowledge and belief. Office, if any, Cell No. Adam Lizardi, Local President (signature of representative or person making charge) Print Name and Title Fax No. Same as 4d

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

e-Mail

same as 4e

Date:

12/3/12

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.